

# DEP BWSO RAO TECHNICAL SCREENING AUDIT FORM

SCANNED

**Disclaimer:** This checklist is for use by DEP in reviewing Response Action Outcome (RAO) Statements, and may not be relied upon for any other purpose. This checklist is not a comprehensive list of RAO requirements, which are fully set forth in MGL c. 21E and 310 CMR 40.0000. Completion of this checklist by DEP does not constitute a final agency decision, and does not create any legal rights or relieve any party of obligations that exist pursuant to applicable laws.

Lead RTN: <u>2-15225</u>			
SUBMITTAL TYPE (Circle one)		OHM description: (Source, Type of OHM, Media Affected) <u>Approximately 20 gallons of hydraulic fluid was released to pavement and two catch basins.</u>	Date RAO Rcvd <u>5/21/04</u>
RAO	RAO-P	LSP Eval. Opin.	
Waiver Compl. St.	RAO w/ AUL		
Other:		Site Use:	
Related RTNs:			
Town: <u>Whitinsville</u>		Site Name:	
Address: <u>335 Main Street</u>			
PRP/OP: <u>Browning Ferris Industries</u>		LSP Name: <u>Kenneth Snow</u>	
Consultant: <u>NEDT</u>		LSP No.: <u>3266</u>	

## TECHNICAL SCREENING CHECKLIST

Condition	Yes	No	?	Page #
<b>I. SITE CONCERNS (Based upon conditions at time of RAO submittal)</b>				
<b>A. Time Critical Conditions</b>				
1. <input type="checkbox"/> Applicable GW-2 standard exceeded @ residence/school with no soil gas/indoor air sampling	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. <input type="checkbox"/> More than 0.5" NAPL observed in any monitoring well	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. <input type="checkbox"/> One or more data points exceeds UCL	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. <input type="checkbox"/> EPC in S-1 soil exceeds Method 1 standard and school/residence within 500 feet	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. <input type="checkbox"/> Site contaminants impacting indoor air	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>B. Drinking Water</b>				
1. Site within potential drinking water source area (PDWSA)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
2. Site located within IWPA/mapped Zone II	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
3. Private/Non- municipal public well(s) located within 500 feet of site	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
4. Municipal well(s) located within 1000 feet of site	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
5. <input type="checkbox"/> Private well contaminated as a result of site	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
6. <input type="checkbox"/> Public water supply contaminated as a result of site	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>C. Contaminated Soil</b>				
1. Category S-3 Soils	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Category S-2 Soils	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Category S-1 Soils	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>D. Site and Area Use</b>				
1. Industrial (no children likely to be present)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Commercial (limited presence of children)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. School/Institution	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Residential	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>E. Released OHM [Contaminant Type(s)]</b>				
1. Petroleum Fuel Oils	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Gasoline, lube oils, waste oils and other petroleum products	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Metals, coal tar, PCBs, pesticides/herbicides, asbestos	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Chlorinated Solvents or Other	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>F. Environmental Concerns</b>				
1. Site within 500 feet of surface water and/or wetlands	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
2. Endangered species habitat, ACEC and/or certified vernal pool within 500 feet	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
3. Confirmed contamination of surface water, sediments and/or wetlands with site contaminants	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>G. Site Complexity</b>				
1. Media other than groundwater or soil affected (surface water, air, sediment)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
2. Co-mingled plumes (i.e., different sources from one or more sites co-mingled)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Bedrock contamination	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
If <input type="checkbox"/> conditions currently exist, see supervisor to discuss.				

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II. TECHNICAL ADEQUACY	Citation(s)	Yes	No	?	NA	Page #
<b>A. Remedial Response Actions – Indication That:</b>						
1. Documentation of removal of remediation waste provided	40.0034(5), (6)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Remediation waste properly managed (reqmnts -Air 95%,gw, sw [NPDES], soil properly handled)	40.0031-40.0049	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Obtained DEP or other agency approvals and work done in accordance with approvals	40.0100(4), 40.0170(2-3, 5)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>B. Source/Extent Investigations – Indication That:</b>						
1. History of OHM use/storage/disposal at the site included	40.0405(1), 40.0835(4)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Potential source(s) identified, characterized, or abated (septic leach field, floor drain, AST, etc.)	40.0923(2), 40.1003(5)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Extent of contamination defined (including downgradient)	40.0904(2)(a), 40.1003(4),(5)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Potential or actual OHM analyzed for and/or evaluated (metals, VPH, VOCs, etc.)	40.0191(2), 40.0904(3)(a), 40.0926(1)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. All likely migration pathways (soil/gw/sw/air/sediment) identified/characterized/evaluated	40.0904(2)(c), 40.1004(1)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Proper sample collection technique/preservation/analysis/data reporting	40.0017	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>C. Risk Characterization – Indication That:</b>						
1. Background identified or characterized	40.0904(2)(b), 40.1020	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Soil/groundwater category properly identified	40.0930	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. EPC calculation provided (spatial or temporal) and EPC properly calculated	40.0926	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Hot Spot(s) addressed, identified (as Hot Spot) and not added in to other EPCs	40.0924(2), 40.0926(3)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Migration Pathways (air, groundwater, etc.) assessed and evaluated in RC (All Methods, media dependent)	40.0904(2)(c), 40.1004(1)(a)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Applicable soil and/or groundwater standards not exceeded (Method 1 or 2) or AUL applied	40.0974, 40.0975	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Correct risk characterization method used	40.0941, 40.0942	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. All receptors accounted for (construction worker, trespassers, wetland, etc.) or AUL applied (Method 3)	40.0920-40.0922	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
9. Proper Exposure Scenario assumptions (exposure period, etc.) (Method 3)	40.0923-40.0925	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
10. All Exposure Pathways (dermal, inhalation, etc.) evaluated (Method 3)	40.0925	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
11. Final RAO for facility/property submitted with total site risk calculated (Method 3)	40.0992, 40.0993(7),(8),(9)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
12. AUL Permitted/Inconsistent Activities, etc. understandable to general public and clearly written	40.0923(4)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>III. Response Action Outcome Statement (RAO) Indication That:</b>						
1. RAO boundaries defined/delineated (clear description/plan of RAO boundaries)	40.1003(4), 40.1056(2)(a)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Relationship of RAO to other RAOs for that location has been defined	40.1056(1)(d)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
3. Correct RAO category	40.1030 – 40.1050	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Indication as to whether OHM(s) exceed UCLs presented	40.1056(1)(i)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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A. CLASS A – Indication That:		Yes	No	?	NA	Page #
1. All uncontrolled sources have been eliminated or controlled	40.1035 (2)(b)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Groundwater concentrations do <i>not</i> exceed standards in GW-1 area	40.1036(5)(b)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Phase IV, Phase V or Post RAO O&M, where required, has been completed	40.1036(6)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
A-1. CLASS A-1 – Indication That:						
1. A permanent solution has been achieved	40.1036(1)(a)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. The level of OHM at the site has been reduced to background	40.1036(1)(a)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Response actions eliminated all threats of release and a release oil and/or hazardous material to the environment has <i>not</i> occurred (This question applies to threats of release only)	40.1036(1)(b)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
A-2. CLASS A-2 – Indication That:						
1. A permanent solution has been achieved	40.1036(2)(a)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. A background feasibility evaluation has been conducted which demonstrates that achievement of background is not feasible	40.1020(3), 40.1056(2)(e)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
A-3. CLASS A-3 – Indication That:						
1. A permanent solution has been achieved	40.1036(3)(a)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Obligations and Conditions of AUL have been implemented	40.1036(3)(c), 40.1056(2)(g)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Reasonable AUL restrictions to maintain No Significant Risk (deep OHM, long exposure period, etc)	40.1074(2)(d-f, h)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. A background feasibility evaluation has been conducted which demonstrates that achievement of background is not feasible	40.1020(3), 40.1056 (2)(e)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Groundwater or Soil OHM concentrations do <i>not</i> exceed UCLs	40.1036(3)(d)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
A-4. CLASS A-4 – Indication That:						
1. A permanent solution has been achieved	40.1036(4)(a)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Obligations and Conditions of AUL have been implemented	40.1036 (4)(c), 40.1056(2)(g)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Reasonable AUL restrictions to maintain No Significant Risk (deep OHM, long exposure period, etc)	40.1074(2)(d-f, h)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Groundwater or Soil concentrations exceed UCLs; however: (check only a, b, or c)	40.1036 (4)(d), 40.1036(5)(a)	---	---	---	---	
a. concentrations are consistent with background	40.1036(5)(a)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. contaminated soil is <i>greater</i> than 15 feet below grade	40.1036 (4)(d), 40.1036(5)(a)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. contaminated soil is beneath an engineered barrier	40.1036 (4)(d), 40.1036(5)(a)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Engineered barrier does compare favorably to all other alternatives	40.0859(4), 40.1036(4)(e)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. UCL Feasibility Evaluation conducted and shows that achieving UCLs is not feasible	40.1036(4)(e), 40.1056(2)(f)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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<b>B. CLASS B – Indication That:</b>					
1. Remedial actions have <i>not</i> been conducted	40.1045(2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. A level of No Significant Risk does exist	40.1045(1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Initial Assessment, Phase I, or Phase II has been completed	40.1046(5)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>B-1. CLASS B-1 – Indication That:</b>					
1. One or more AULs are <i>not</i> necessary to maintain a level of no significant risk	40.1046(1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>B-2. CLASS B-2 – Indication That:</b>					
1. Obligations and Conditions of AUL have been implemented	40.1046(2)(a), 40.1056(2)(g)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Reasonable AUL restrictions to maintain No Significant Risk (deep OHM, long exposure period, etc)	40.1074(2)(d-f, h)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Groundwater or Soil OHM concentrations do <i>not</i> exceed UCLs	40.1046(2)(b)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>B-3. CLASS B-3 – Indication That:</b>					
1. Obligations and Conditions of AUL have been implemented	40.1046(3)(a), 40.1056(2)(g)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Reasonable AUL restrictions to maintain No Significant Risk (deep OHM, long exposure period, etc)	40.1074(2)(d-f, h)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. OHM concentrations exceed UCLs; however: (check only a or b)	40.1046(3)(b),(c)	---	---	---	---
a. soil is located <i>greater</i> than 15 feet from ground surface	40.1046(3)(b)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. UCL Feasibility Evaluation was conducted and shows that achieving UCLs is not feasible	40.1046(3)(c)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>C. CLASS C – Indication That:</b>					
1. All substantial hazards have been eliminated	40.1050(1), 40.1056(2)(d)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Soil and/or groundwater concentrations exceed any applicable standards	40.1050(2)(b)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Phase II and Phase III were submitted	40.1050(3), 40.1050(4)(a)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Plan of definitive & enterprising steps to achieve a permanent solution is included	40.1050(5)(a), 40.1056(2)(j)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Statement indicating whether post RAO Active O&M will be conducted is included	40.1056(1)(e)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Plan for post-RAO active O&M is included	40.1056(2)(l)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Can 5/21/04  
RECEIVED



Massachusetts Department of Environmental Protection  
Bureau of Waste Site Cleanup

BWSC103

RELEASE NOTIFICATION & NOTIFICATION  
RETRACTION FORM

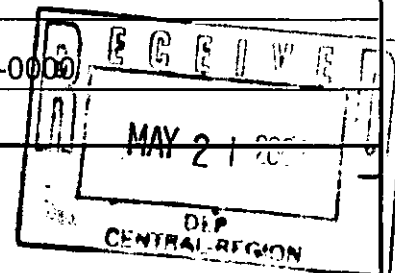
Release Tracking Number

2 - 15225

Pursuant to 310 CMR 40.0335 and 310 CMR 40.0371 (Subpart C)

A. RELEASE OR THREAT OF RELEASE LOCATION:

1. Release Name/Location Aid: \_\_\_\_\_  
2. Street Address: 355 Main Street  
3. City/Town: Whitinsville 4. ZIP Code: 01588-0000



B. THIS FORM IS BEING USED TO: (check one)

- ☒ 1. Submit a **Release Notification**  
☐ 2. Submit a **Retraction of a Previously Reported Notification** of a release or threat of release including supporting documentation required pursuant to 310 CMR 40.0335 (Section C is not required)

(All sections of this transmittal form must be filled out unless otherwise noted above)

C. INFORMATION DESCRIBING THE RELEASE OR THREAT OF RELEASE (TOR):

1. Date and time of Oral Notification, if applicable: 04/26/2004 Time: 01:40 ☐ AM ☒ PM  
mm/dd/yyyy hh:mm  
2. Date and time you obtained knowledge of the Release or TOR: 04/26/2004 Time: 12:50 ☐ AM ☒ PM  
mm/dd/yyyy hh:mm  
3. Date and time release or TOR occurred, if known: 04/26/2004 Time: 12:50 ☐ AM ☒ PM  
mm/dd/yyyy hh:mm

Check all Notification Thresholds that apply to the Release or Threat of Release:  
(for more information see 310 CMR 40.0310 - 40.0315)

4. 2 HOUR REPORTING CONDITIONS

- ☒ a. Sudden Release  
☐ b. Threat of Sudden Release  
☐ c. Oil Sheen on Surface Water  
☐ d. Poses Imminent Hazard  
☐ e. Could Pose Imminent Hazard  
☐ f. Release Detected in Private Well  
☐ g. Release to Storm Drain  
☐ h. Sanitary Sewer Release (Imminent Hazard Only)

5. 72 HOUR REPORTING CONDITIONS

- ☐ a. Subsurface Non-Aqueous Phase Liquid (NAPL) Equal to or Greater than 1/2 Inch  
☐ b. Underground Storage Tank (UST) Release  
☐ c. Threat of UST Release  
☐ d. Release to Groundwater near Water Supply  
☐ e. Release to Groundwater near School or Residence  
☐ f. Substantial Release Migration

6. 120 DAY REPORTING CONDITIONS

- ☐ a. Release of Hazardous Material(s) to Soil or Groundwater Exceeding Reportable Concentration(s)  
☐ b. Release of Oil to Soil Exceeding Reportable Concentration(s) and Affecting More than 2 Cubic Yards  
☐ c. Release of Oil to Groundwater Exceeding Reportable Concentration(s)  
☐ d. Subsurface Non-Aqueous Phase Liquid (NAPL) Equal to or Greater than 1/8 Inch and Less than 1/2 Inch



Massachusetts Department of Environmental Protection  
Bureau of Waste Site Cleanup

BWSC103

RELEASE NOTIFICATION & NOTIFICATION  
RETRACTION FORM

Release Tracking Number

2 - 15225

Pursuant to 310 CMR 40.0335 and 310 CMR 40.0371 (Subpart C)

C. INFORMATION DESCRIBING THE RELEASE OR THREAT OF RELEASE (TOR): (cont.)

7. List below the Oils (O) or Hazardous Materials (HM) that exceed their Reportable Concentration (RC) or Reportable Quantity (RQ) by the greatest amount.

O or HM Released	CAS Number, if known	O or HM	Amount or Concentration	Units	RCs Exceeded, if Applicable (RCS-1, RCS-2, RCGW-1, RCGW-2)
Hydraulic Oil		O	20	GAL	N/A

☐ 8. Check here if a list of additional Oil and Hazardous Materials subject to reporting is attached.

D. PERSON REQUIRED TO NOTIFY:

1. Check all that apply: ☐ a. change in contact name ☐ b. change of address ☐ c. change in the person notifying

2. Name of Organization: Browning Ferris Industries

3. Contact First Name: Christopher

4. Last Name: Macera

5. Street: One Hardscrabble Road

6. Title: Site Manager

7. City/Town: Auburn

8. State: MA

9. ZIP Code: 01501-0000

10. Telephone: (508) 832-9001

11. Ext.: \_\_\_\_\_

12. FAX: \_\_\_\_\_

☒ 13. Check here if attaching names and addresses of owners of properties affected by the Release or Threat of Release, other than an owner who is submitting this Release Notification (required).

E. RELATIONSHIP OF PERSON TO RELEASE OR THREAT OF RELEASE:

☒ 1. RP or PRP ☐ a. Owner ☐ b. Operator ☒ c. Generator ☐ d. Transporter

☐ e. Other RP or PRP Specify: \_\_\_\_\_

☐ 2. Fiduciary, Secured Lender or Municipality with Exempt Status (as defined by M.G.L. c. 21E, s. 2)

☐ 3. Agency or Public Utility on a Right of Way (as defined by M.G.L. c. 21E, s. 5(j))

☐ 4. Any Other Person Otherwise Required to Notify

Specify Relationship: \_\_\_\_\_



Massachusetts Department of Environmental Protection  
Bureau of Waste Site Cleanup

BWSC103

RELEASE NOTIFICATION & NOTIFICATION  
RETRACTION FORM

Release Tracking Number

2 - 15225

Pursuant to 310 CMR 40.0335 and 310 CMR 40.0371 (Subpart C)

F. CERTIFICATION OF PERSON REQUIRED TO NOTIFY:

1. I, Christopher Macera, attest under the pains and penalties of perjury (i) that I have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this transmittal form, (ii) that, based on my inquiry of those individuals immediately responsible for obtaining the information, the material information contained in this submittal is, to the best of my knowledge and belief, true, accurate and complete, and (iii) that I am fully authorized to make this attestation on behalf of the entity legally responsible for this submittal. I/the person or entity on whose behalf this submittal is made am/is aware that there are significant penalties, including, but not limited to, possible fines and imprisonment, for willfully submitting false, inaccurate, or incomplete information.

2. By: [Signature] Signature

3. Title: Site Manager

4. For: [Signature]  
(Name of person or entity recorded in Section D)

5. Date: 5/10/04  
mm/dd/yyyy

☐ 6. Check here if the address of the person providing certification is different from address recorded in Section D.

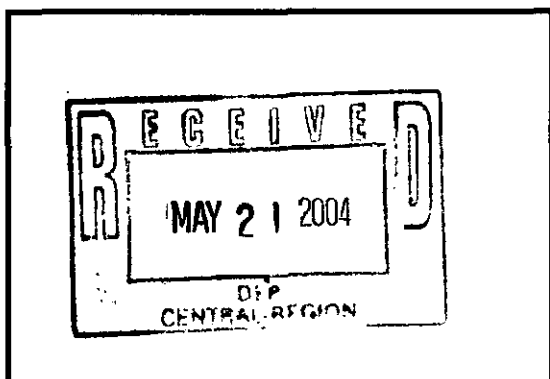
7. Street: \_\_\_\_\_

8. City/Town: \_\_\_\_\_ 9. State: \_\_\_\_\_ 10. ZIP Code: \_\_\_\_\_

11. Telephone: \_\_\_\_\_ 12. Ext.: \_\_\_\_\_ 13. FAX: \_\_\_\_\_

YOU MUST LEGIBLY COMPLETE ALL RELEVANT SECTIONS OF THIS FORM OR DEP MAY  
RETURN THE DOCUMENT AS INCOMPLETE. IF YOU SUBMIT AN INCOMPLETE FORM, YOU  
MAY BE PENALIZED FOR MISSING A REQUIRED DEADLINE.

Date Stamp (DEP USE ONLY:)



**ATTACHMENT**

**To Release Notification & Notification Retraction Form BWSC-103**

**355 Main Street  
Whitinsville, MA**

**RTN 2-15225**

The release of hydraulic fluid is associated with a failure of a hydraulic line on a trash collection truck. The release has affected the property listed above. The contact for the property owner is:

Arcade Realty Trust  
1 Main Street  
Whitinsville, MA 01588

Phone # 508-234-6302



Lat 5/21/04  
ACR/MS



Massachusetts Department of Environmental Protection  
Bureau of Waste Site Cleanup

BWSC104

**RESPONSE ACTION OUTCOME (RAO) STATEMENT**

Pursuant to 310 CMR 40.0580 (Subpart E) & 40.1056 (Subpart J)

Release Tracking Number

2 - 15225

**A. SITE LOCATION:**

1. Site Name/Location Aid: \_\_\_\_\_

2. Street Address: 355 Main Street

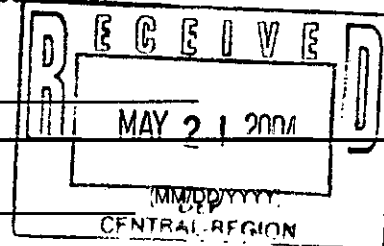
3. City/Town: Whitinsville

4. ZIP Code: 01588-0000

☐ 5. Check here if a Tier Classification Submittal has been provided to DEP for this disposal site.

☐ a. Tier 1A ☐ b. Tier 1B ☐ c. Tier 1C ☐ d. Tier 2

6. If a Tier I Permit has been issued, provide Permit Number: \_\_\_\_\_



**B. THIS FORM IS BEING USED TO:** (check all that apply)

1. List Submittal Date of RAO Statement (if previously submitted): \_\_\_\_\_

☒ 2. Submit a **Response Action Outcome (RAO) Statement**

☐ a. Check here if this RAO Statement covers additional Release Tracking Numbers (RTNs). RTNs that have been previously linked to a Primary Tier Classified RTN do not need to be listed here.

b. Provide additional Release Tracking Number(s) that are covered by this RAO Statement.

☐ -  ☐ -

☐ 3. Submit a **Revised Response Action Outcome Statement**

☐ a. Check here if this Revised RAO Statement covers additional Release Tracking Numbers (RTNs), not listed on the RAO Statement or previously submitted Revised RAO Statements. RTNs that have been previously linked to a Primary Tier Classified RTN do not need to be listed here.

b. Provide additional Release Tracking Number(s) that are covered by this RAO Statement.

☐ -  ☐ -

☐ 4. Submit a **Response Action Outcome Partial (RAO-P) Statement**

Check above box, if any Response Actions remain to be taken to address conditions associated with this disposal site having the Primary RTN listed in the header section of this transmittal form. This RAO Statement will record only an RAO-Partial Statement for that RTN. A final RAO Statement will need to be submitted that references all RAO-Partial Statements and, if applicable, covers any remaining conditions not covered by the RAO-Partial Statements.

☐ 5. Submit an optional **Phase I Completion Statement** supporting an RAO Statement

☐ 6. Submit a **Periodic Review Opinion evaluating the status of a Temporary Solution** for a Class C RAO Statement (Section E is optional)

☐ 7. Submit a **Retraction** of a previously submitted **Response Action Outcome Statement** (Sections D & E are not required)

(All sections of this transmittal form must be filled out unless otherwise noted above)





Massachusetts Department of Environmental Protection  
Bureau of Waste Site Cleanup

BWSC104

RESPONSE ACTION OUTCOME (RAO) STATEMENT

Pursuant to 310 CMR 40.0580 (Subpart E) & 40.1056 (Subpart J)

Release Tracking Number

2 - 15225

C. DESCRIPTION OF RESPONSE ACTIONS: (check all that apply, for volumes list cumulative amounts)

- |   |   |
|---|---|
| <input type="checkbox"/> 1. Assessment and/or Monitoring Only                           | <input type="checkbox"/> 2. Temporary Covers or Caps                        |
| <input checked="" type="checkbox"/> 3. Deployment of Absorbent or Containment Materials | <input type="checkbox"/> 4. Temporary Water Supplies                        |
| <input type="checkbox"/> 5. Structure Venting System                                    | <input type="checkbox"/> 6. Temporary Evacuation or Relocation of Residents |
| <input checked="" type="checkbox"/> 7. Product or NAPL Recovery                         | <input type="checkbox"/> 8. Fencing and Sign Posting                        |
| <input type="checkbox"/> 9. Groundwater Treatment Systems                               | <input type="checkbox"/> 10. Soil Vapor Extraction                          |
| <input type="checkbox"/> 11. Bioremediation   | <input type="checkbox"/> 12. Air Sparging                                   |
| <input type="checkbox"/> 13. Removal of Contaminated Soils                              |   |
| <input type="checkbox"/> a. Re-use, Recycling or Treatment                              |   |
| <input type="checkbox"/> i. On Site   | Estimated volume in cubic yards _____                                       |
| <input type="checkbox"/> ii. Off Site   | Estimated volume in cubic yards _____                                       |

iiia. Facility Name: \_\_\_\_\_ Town: \_\_\_\_\_ State: \_\_\_\_\_

iiib. Facility Name: \_\_\_\_\_ Town: \_\_\_\_\_ State: \_\_\_\_\_

iiic. Describe: \_\_\_\_\_

☐ b. Landfill

☐ i. Cover Estimated volume in cubic yards \_\_\_\_\_

Facility Name: \_\_\_\_\_ Town: \_\_\_\_\_ State: \_\_\_\_\_

☐ ii. Disposal Estimated volume in cubic yards \_\_\_\_\_

Facility Name: \_\_\_\_\_ Town: \_\_\_\_\_ State: \_\_\_\_\_

☐ 14. Removal of Drums, Tanks or Containers:

a. Describe Quantity and Amount: \_\_\_\_\_

b. Facility Name: \_\_\_\_\_ Town: \_\_\_\_\_ State: \_\_\_\_\_

c. Facility Name: \_\_\_\_\_ Town: \_\_\_\_\_ State: \_\_\_\_\_





Massachusetts Department of Environmental Protection  
Bureau of Waste Site Cleanup

BWSC104

RESPONSE ACTION OUTCOME (RAO) STATEMENT

Pursuant to 310 CMR 40.0580 (Subpart E) & 40.1056 (Subpart J)

Release Tracking Number

2 - 15225

C. DESCRIPTION OF RESPONSE ACTIONS (cont.): (check all that apply, for volumes list cumulative amounts)

☒ 15. Removal of Other Contaminated Media:

a. Specify Type and Volume: Contaminated absorbents, 1.9 cubic yards

Oily Water 1.015 gallons

b. Facility Name: EQ Detroit, Inc Town: Detroit State: MI

c. Facility Name: Zecco, Inc. Town: Northborough State: MA

☐ 16. Other Response Actions:

Describe: \_\_\_\_\_

☐ 17. Use of Innovative Technologies:

Describe: \_\_\_\_\_

D. RESPONSE ACTION OUTCOME CLASS:

Specify the Class of Response Action Outcome that applies to the disposal site, or site of the Threat of Release.  
Select ONLY one Class.

☒ 1. Class A-1 RAO: Specify one of the following:

☒ a. Contamination has been reduced to background levels. ☐ b. A Threat of Release has been eliminated.

☐ 2. Class A-2 RAO: You MUST provide justification that reducing contamination to or approaching background levels is infeasible.

☐ 3. Class A-3 RAO: You MUST provide an implemented Activity and Use Limitation (AUL) and justification that reducing contamination to or approaching background levels is infeasible.

☐ 4. Class A-4 RAO: You MUST provide an implemented AUL, justification that reducing contamination to or approaching background levels is infeasible, and justification that reducing contamination to less than Upper Concentration Limits (UCLs) 15 feet below ground surface or below an engineered barrier is infeasible. If the permanent solution relies upon an engineered barrier, you must also provide a Phase III report justifying the selection of the engineered barrier.





Massachusetts Department of Environmental Protection  
Bureau of Waste Site Cleanup

BWSC104

RESPONSE ACTION OUTCOME (RAO) STATEMENT

Pursuant to 310 CMR 40.0580 (Subpart E) & 40.1056 (Subpart J)

Release Tracking Number

2

-

15225

D. RESPONSE ACTION OUTCOME CLASS (cont.):

- ☐ 5. Class B-1 RAO: Specify one of the following:
- ☐ a. Contamination is consistent with background levels ☐ b. Contamination is NOT consistent with background levels.
- ☐ 6. Class B-2 RAO: You MUST provide an implemented AUL.
- ☐ 7. Class B-3 RAO: You MUST provide an implemented AUL and justification that reducing contamination to less than Upper Concentration Limits (UCLs) 15 feet below ground surface is infeasible.
- ☐ 8. Class C RAO: Specify one:
- ☐ a. Monitoring ☐ b. Passive Operation and Maintenance
- ☐ c. Active Operation and Maintenance (defined at 310 CMR 40.0006)

E. RESPONSE ACTION OUTCOME INFORMATION:

1. Specify the Risk Characterization Method(s) used to achieve the RAO described above:

- ☐ a. Method 1 ☐ b. Method 2 ☐ c. Method 3
- ☒ d. Method Not Applicable-Contamination reduced to or consistent with background, or Threat of Release abated

2. Specify all Soil and Groundwater Categories used in the Risk Characterization. More than one Soil Category and more than one Groundwater Category may apply at a Site. Be sure to check off all APPLICABLE categories.

a. Soil Category(ies) Applicable:

- ☐ i. S-1/GW-1 ☐ iv. S-2/GW-1 ☐ vii. S-3/GW-1
- ☐ ii. S-1/GW-2 ☐ v. S-2/GW-2 ☐ viii. S-3/GW-2
- ☐ iii. S-1/GW-3 ☐ vi. S-2/GW-3 ☐ ix. S-3/GW-3

b. Groundwater Category(ies) Impacted:

- ☐ i. GW-1 ☐ ii. GW-2 ☐ iii. GW-3

3. Specify remediation conducted.

- ☐ a. Check here if soil remediation was conducted.
- ☐ b. Check here if groundwater remediation was conducted.

4. Estimate the number of acres this RAO Statement applies to: 0.02





Massachusetts Department of Environmental Protection  
Bureau of Waste Site Cleanup

BWSC104

RESPONSE ACTION OUTCOME (RAO) STATEMENT

Release Tracking Number

Pursuant to 310 CMR 40.0580 (Subpart E) & 40.1056 (Subpart J)

2 - 15225

F. LSP SIGNATURE AND STAMP:

I attest under the pains and penalties of perjury that I have personally examined and am familiar with this transmittal form, including any and all documents accompanying this submittal. In my professional opinion and judgment based upon application of (i) the standard of care in 309 CMR 4.02(1), (ii) the applicable provisions of 309 CMR 4.02(2) and (3), and 309 CMR 4.03(2), and (iii) the provisions of 309 CMR 4.03(3), to the best of my knowledge, information and belief,

> if Section B indicates that either an RAO Statement, Phase I Completion Statement and/or Periodic Review Opinion is being provided, the response action(s) that is (are) the subject of this submittal (i) has (have) been developed and implemented in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, (ii) is (are) appropriate and reasonable to accomplish the purposes of such response action(s) as set forth in the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, and (iii) complies(y) with the identified provisions of all orders, permits, and approvals identified in this submittal.

I am aware that significant penalties may result, including, but not limited to, possible fines and imprisonment, if I submit information which I know to be false, inaccurate or materially incomplete.

1. First Name: Kenneth 2. Last Name: Snow  
3. Telephone: (508) 370-0272 4. Ext.: \_\_\_\_\_ 5. FAX: 508-370-9569  
6. Signature: [Signature] 7. Date: 05/03/2004  
8. LSP #: 3266 9. LSP Stamp:



G. PERSON MAKING SUBMITTAL:

1. Check all that apply: ☐ a. change in contact name. ☐ b. change of address ☐ c. change in the person undertaking response actions  
2. Name of Organization: Browning Ferris Industries  
3. Contact First Name: Christopher 4. Last Name: Macera  
5. Street: One Hardscrabble Road 6. Title: Site Manager  
7. City/Town: Auburn 8. State: MA 9. ZIP Code: 01501-0000  
10. Telephone: (508) 832-9001 11. Ext.: \_\_\_\_\_ 12. FAX: \_\_\_\_\_





Massachusetts Department of Environmental Protection  
Bureau of Waste Site Cleanup

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RESPONSE ACTION OUTCOME (RAO) STATEMENT

Pursuant to 310 CMR 40.0580 (Subpart E) & 40.1056 (Subpart J)

Release Tracking Number

2 - 15225

H. RELATIONSHIP TO RELEASE OR THREAT OF RELEASE OF PERSON MAKING SUBMITTAL:

- ☒ 1. RP or PRP    ☐ a. Owner    ☐ b. Operator    ☒ c. Generator    ☐ d. Transporter  
☐ e. Other RP or PRP    Specify: \_\_\_\_\_

☐ 2. Fiduciary, Secured Lender or Municipality with Exempt Status (as defined by M.G.L. c. 21E, s. 2)

☐ 3. Agency or Public Utility on a Right of Way (as defined by M.G.L. c. 21E, s. 5(j))

☐ 4. Any Other Person Making Submittal    Specify Relationship: \_\_\_\_\_

I. REQUIRED ATTACHMENT AND SUBMITTALS:

- ☒ 1. Check here if the Response Action(s) on which this opinion is based, if any, are (were) subject to any order(s), permit(s) and/or approval(s) issued by DEP or EPA. If the box is checked, you MUST attach a statement identifying the applicable provisions thereof.
- ☐ 2. Check here to certify that the Chief Municipal Officer and the Local Board of Health have been notified of the submittal of an RAO Statement that relies on the public way/rail right-of-way exemption from the requirements of an AUL.
- ☒ 3. Check here to certify that the Chief Municipal Officer and the Local Board of Health have been notified of the submittal of a RAO Statement with instructions on how to obtain a full copy of the report.
- ☒ 4. Check here to certify that documentation is attached specifying the location of the Site, or the location and boundaries of the Disposal Site subject to this RAO Statement. If submitting an RAO Statement for a PORTION of a Disposal Site, you must document the location and boundaries for both the portion subject to this submittal and, to the extent defined, the entire Disposal Site.
- ☐ 5. Check here if required to submit one or more AULs. You must submit an AUL Transmittal Form (BWSC113) and a copy of each implemented AUL related to this RAO Statement. Specify the type of AUL(s) below: (required for Class A-3, A-4, B-2, B-3 RAO Statements)
- ☐ a. Notice of Activity and Use Limitation    b. Number of Notices submitted: \_\_\_\_\_
- ☐ c. Grant of Environmental Restriction    d. Number of Grants submitted: \_\_\_\_\_
- ☐ 6. If an RAO Compliance Fee is required for any of the RTNs listed on this transmittal form, check here to certify that an RAO Compliance Fee was submitted to DEP, P. O. Box 4062, Boston, MA 02211.
- ☐ 7. Check here if any non-updatable information provided on this form is incorrect, e.g. Site Address/Location Aid. Send corrections to the DEP Regional Office.
- ☒ 8. Check here to certify that the LSP Opinion containing the material facts, data, and other information is attached.





Massachusetts Department of Environmental Protection  
Bureau of Waste Site Cleanup

BWSC104

RESPONSE ACTION OUTCOME (RAO) STATEMENT

Pursuant to 310 CMR 40.0580 (Subpart E) & 40.1056 (Subpart J)

Release Tracking Number

2 - 15225

J. CERTIFICATION OF PERSON MAKING SUBMITTAL:

1. I, Christopher Macera, attest under the pains and penalties of perjury (i) that I have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this transmittal form, (ii) that, based on my inquiry of those individuals immediately responsible for obtaining the information, the material information contained in this submittal is, to the best of my knowledge and belief, true, accurate and complete, and (iii) that I am fully authorized to make this attestation on behalf of the entity legally responsible for this submittal. I/the person or entity on whose behalf this submittal is made am/is aware that there are significant penalties, including, but not limited to, possible fines and imprisonment, for willfully submitting false, inaccurate, or incomplete information.

2. By: \_\_\_\_\_ 3. Title: Site Manager

Signature

4. For: Browning Ferris Industries

(Name of person or entity recorded in Section G)

5/10/04

(mm/dd/yyyy)

☐ 5. Check here if the address of the person providing certification is different from address recorded in Section G.

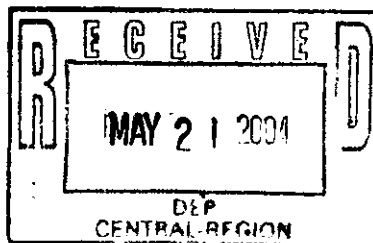
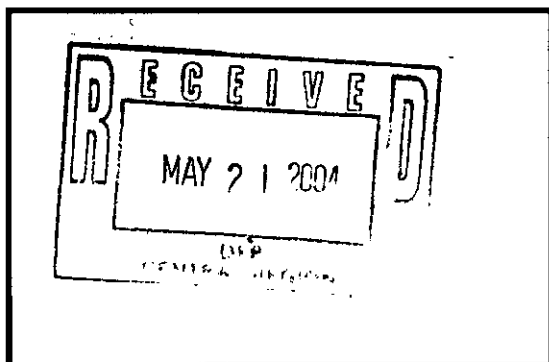
6. Street: \_\_\_\_\_

7. City/Town: \_\_\_\_\_ 8. State: \_\_\_\_\_ 9. ZIP Code: \_\_\_\_\_

10. Telephone: \_\_\_\_\_ 11. Ext.: \_\_\_\_\_ 12. FAX: \_\_\_\_\_

YOU MUST LEGIBLY COMPLETE ALL RELEVANT SECTIONS OF THIS FORM OR DEP MAY RETURN THE DOCUMENT AS INCOMPLETE. IF YOU SUBMIT AN INCOMPLETE FORM, YOU MAY BE PENALIZED FOR MISSING A REQUIRED DEADLINE.

Date Stamp (DEP USE ONLY:)



## **ATTACHMENT**

### **To Form BWSC-104 Response Action Outcome Statement (Response Actions subject to DEP verbal IRA approval)**

**RTN 2-15225**

On April 26, 2004 Mr. Kevin Daoust of the DEP, in a conversation with Michael Robertson of NEDT approved an Immediate Response Action consisting of surface cleanup via application of absorbents (speedi-dry) on the affected paved surfaces, clean the affected catch basins and storm water collection system, and dispose of the used absorbent material, material removed from the catch basins.





COMMONWEALTH OF MASSACHUSETTS  
EXECUTIVE OFFICE OF ENVIRONMENTAL AFFAIRS  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
Central Regional Office, 627 Main Street, Worcester, MA 01608

MITT ROMNEY  
Governor

KERRY HEALEY  
Lieutenant Governor

ELLEN ROY HERZFELDER  
Secretary

ROBERT W. GOLLEDGE Jr.  
Commissioner

**URGENT LEGAL MATTER: PROMPT ACTION NECESSARY**

Browning Ferris Industries, Inc.  
1 Hardscrabble Rd.  
Auburn, MA 01501

RE: CRWSC - Northbridge  
Roadway Release  
355 Main St.

ATTN: Chris Macera,  
General Manager

**Release Tracking Number: 2-15225**

**NOTICE OF RESPONSIBILITY**  
**M.G.L. c. 21E, 310 CMR 40.0000**

Dear Mr. Macera:

The Department of Environmental Protection (the Department) was notified on April 26, 2004, at 1:38 p.m., that a sudden release of twenty (20) gallons of hydraulic oil occurred at the above-referenced property. Specifically, the release occurred as the result of a ruptured hydraulic line on a trash truck. The above-mentioned amount of hydraulic oil impacted the paved roadway surface and a nearby catch basin. Such condition required oral notification to the Department within 2-hours and performance of an Immediate Response Action (IRA). In light of the notification and other information available, the Department wishes to ensure that you are aware of your rights and responsibilities under the Massachusetts Oil and Hazardous Material Release Prevention and Response Act, M.G.L. c. 21E, and the Massachusetts Contingency Plan (MCP), 310 CMR 40.0000.

The Department has identified the property, or portions thereof, as a disposal site that requires the conduct of cleanup or other response actions. The cleanup of disposal sites is governed by Chapter 21E and the MCP. The Department has assigned Release Tracking Number (RTN): 2-15225 to this disposal site for the release notification received.

The Department also has reason to believe that you (as used in this Notice, "you" refers to Browning Ferris Industries, Inc.) are a party with potential liability for response action costs and damages under Chapter 21E, § 5.

The attached summary is intended to provide you with information about liability under Chapter 21E to assist you in deciding what actions to take in response to this Notice.



You should be aware that you might have claims against third parties for damages, including claims for contribution or reimbursement for the costs of cleanup. Such claims do not exist indefinitely but are governed by laws that establish the time allowed for bringing litigation. The Department encourages you to take any action necessary to protect any such claims you may have against third parties.

### IMMEDIATE RESPONSE ACTIONS

Information on file with the Department indicates that the following response actions have been performed prior to notification at this disposal site:

- The driver of the truck spread speedi-dri on the roadway surface in an effort to contain the release.

On April 26, 2004 at 1:38 p.m. "you" agreed to take the required IRA.

On April 26, 2004, the Department gave you oral approval to conduct the IRA you proposed to initiate a timely response to this release. The Department's oral IRA approval included the following:

- Remove oil from impacted catch basins, and clean out the impacted catch basins as needed;
- Install absorbent boom at the discharge of the storm drainage system as a precaution; and
- Remove and properly dispose of all contaminated remediation debris associated with this release.

You must dispose of any Remediation Waste as defined by the MCP, including, without limitation, contaminated soil and/or debris, generated at the location in accordance with 310 CMR 40.0030. Any Bill of Lading accompanying such waste **must bear the seal and signature of a Licensed Site Professional (LSP).**

### NECESSARY RESPONSE ACTIONS AND APPLICABLE DEADLINES

Please be advised that **April 26, 2004** is considered to be the date of release notification. Unless otherwise stated, this date will be the baseline for calculating compliance with deadlines contained within the MCP.

Roadway Release; 355 Main St., Northbridge; RTN 2-15225

The MCP requires responsible parties and any other person undertaking response actions at a disposal site to perform Immediate Response Actions in response to sudden releases, Imminent Hazards and Conditions of Substantial Release Migration. Such persons must continue to evaluate the need for Immediate Response Actions and notify the Department immediately if such a need exists.

As an integral part of the response action(s) for this release, you must also comply with the following:

1. Submit a completed *Release Notification & Retraction Form* to the Department in accordance with 310 CMR 40.0300 (i.e., within **60 days** of the date of release notification).
2. Submit an IRA Plan (310 CMR 40.0420), or IRA Completion Statement (310 CMR 40.0427), or a Response Action Outcome Statement (310 CMR 40.1000) whichever is applicable to the Department within **60 days** of the date of the release notification or the date of service of this Notice, whichever comes first.

No disposal site will be deemed to have had all the necessary and required response actions taken for it unless and until all substantial hazards presented by the release and/or threat of release have been eliminated and a level of no significant risk exists or has been achieved in compliance with M.G.L. c. 21E and the MCP.

**A fee of \$1,200.00 is assessed if an RAO is filed 120 days after release notification, but before Tier Classification.** Therefore, if all remediation work has been completed, you are encouraged to have the RAO submitted promptly to avoid the fee.

Unless otherwise provided by the Department, responsible parties have one year from the initial date notice of a release or threat of release is provided to the Department pursuant to 310 CMR 40.0300 or from the date the Department issues a Notice of Responsibility, whichever occurs earlier, to file with the Department one of the following submittals: (1) a completed Tier Classification Submittal; or (2) a Response Action Outcome Statement. If required by the MCP, a completed Tier I Permit Application must also accompany a Tier Classification Submittal. The deadline for these submittals for this disposal site is **April 26, 2005**.

Roadway Release; 355 Main St., Northbridge; RTN 2-15225

**PROCEDURES TO FOLLOW TO UNDERTAKE RESPONSE ACTIONS**

The Department encourages parties having liability under M.G.L. c. 21E to take prompt action in response to releases and threats of release of oil and hazardous materials. By taking prompt action, liable parties may significantly lower cleanup costs and avoid the imposition of, or reduce the amount of, certain permit and/or annual compliance assurance fees payable under 310 CMR 4.00 (e.g., no annual compliance assurance fee is due for Response Action Outcome Statements submitted to the Department within 120 days of the initial date of release notification).

You must employ or engage an LSP to manage, supervise, or actually perform all response actions which you intend to undertake at this disposal site. You may obtain a list of the names and addresses of LSPs by visiting [www.mass.gov/lsp](http://www.mass.gov/lsp), by contacting the Board of Registration of Hazardous Waste Site Cleanup Professionals by telephone at (617) 556-1091, or in person or by mail at One Winter Street, 10th Floor, Boston, Massachusetts 02108.

If you have any questions, please contact this office at the letterhead address or at (508) 792-7653. The Department requests that you inform your LSP of this Notice. All future correspondence communications regarding the disposal site should reference RTN: **2-15225**.

Sincerely,



Nicholas J. Child  
Branch Chief, Emergency Response  
Bureau of Waste Site Cleanup

5/27/04

NJC/kwd  
[ NOR/ISSUED-ER ]  
Enclosures

cc: Northbridge Fire Department  
Kenneth Snow, LSP; Pease, Snow & Associates, Inc.; 12 Graystone Way,  
Southborough, MA 01772  
Database Entry

## SUMMARY OF LIABILITY UNDER CHAPTER 21E

As stated in the Notice of Responsibility accompanying this Summary, the Department has reason to believe that you are a Potentially Responsible Party ("PRP") with potential liability under M.G.L. c. 21E, Section 5, for response action costs and damages to natural resources caused by the release and/or threat of release. The Department has identified you as a PRP because it believes you fall within one or more of the following categories of persons made potentially liable by Subsection 5(a):

- any current owner or operator of a site from or at which there is or has been a release or threat of release of oil and/or hazardous material;
- any person who owned or operated a site at the time hazardous material was stored or disposed of;
- any person who arranged for the transport, disposal, storage or treatment of hazardous material to or at a site;
- any person who transported hazardous material to a transport, disposal, storage or treatment site from which there is or has been a release or threat of release of such material; and
- any person who otherwise caused or is legally responsible for a release or threat of release of oil or hazardous material at a site.

For purposes of the MCP, you are considered a Responsible Party ("RP") with actual liability under Chapter 21E if you fall within one of these categories unless you (1) are entitled to a defense under Section 5 or other applicable law, and (2) have reasonably incurred cleanup costs in an amount equal to or greater than any applicable cap on liability under Subsection 5(d).

This liability is "strict," meaning it is not based on fault, but solely on your status as an owner, operator, generator, transporter or disposer. It is also joint and several, meaning that each person who falls within one of these categories may be held liable for all response action costs incurred at the site, regardless of the existence of any other liable parties.

Section 5 provides a few narrowly drawn defenses to liability, including a defense for releases and damages caused by an act of God, an act of war or an act by a third party other than an employee, agent or person with whom the party has a contractual relationship (*see* Subsection 5(c)); a defense for certain owners of residential property at which the owner maintains a permanent residence (*see* Subsection 5(h)); and a defense for certain public utilities and agencies of the Commonwealth which own a right-of-way that is a site (*see* Subsection 5(j)).

You may voluntarily undertake response actions under the MCP without having your liability under Chapter 21E formally adjudicated by the Department. If you do not take the necessary response actions, or fail to perform them in an appropriate and timely manner, the Department is authorized by Chapter 21E to perform the necessary work.

By taking the necessary response actions, you can avoid liability for response action costs incurred by the Department in performing these actions. If you are a RP and you fail to perform necessary response actions at the site, you may be held liable for up to three (3) times all response action costs incurred by the Department and sanctions may be imposed on you for failure to perform response actions required by the MCP.

Response action costs include, without limitation, the cost of direct hours spent by Department employees arranging for response actions or overseeing work performed by persons other than the Department or its contractors, expenses incurred by the Department in support of those direct hours, and payments to the Department's contractors (for more detail on cost liability, *see* 310 CMR 40.1200: Cost Recovery). The Department may also assess interest on costs incurred at the rate of twelve percent (12%), compounded annually.

Any liability to the Commonwealth under Chapter 21E constitutes a debt to the Commonwealth. To secure payment of this debt, the Department may place liens on all of your property in the Commonwealth under M.G.L. c. 21E, Section 13. To recover this debt, the Commonwealth may foreclose on these liens or the Attorney General may bring legal action against you.

In addition to your potential liability for response action costs and damages to natural resources caused by the release, civil and criminal liability may also be imposed by a court of competent jurisdiction under M.G.L. c. 21E, Section 11, and civil administrative penalties may be assessed by the Department under M.G.L. c. 21A, Section 16, for each violation of Chapter 21E, the MCP or any order, permit or approval issued thereunder.

If you are an RP and you have reason to believe that your performance of the necessary response actions is beyond your technical, financial or legal ability, you should promptly notify the Department in writing of your inability in accordance with Chapter 21E, Subsection 5(e), and 310 CMR 40.0172. If you assert and demonstrate in compliance therewith that performing or paying for such response action is beyond your ability, Subsection 5(e) provides you with a limited defense to an action by the Commonwealth for recovery of two to three times the Department's response action costs and 310 CMR 40.0172 provides you with a limited defense to the Department's assessment of civil administrative penalties.



Massachusetts Department of Environmental Protection  
Bureau of Waste Site Cleanup

BWSC-101

RELEASE LOG FORM

Release Tracking Number

2 - 15225

A. LOG INFORMATION:

Log Date: 4/26/04

Log Time: 1:38

Check one:

☐ AM ☒ PM

Use of Form:  
(check one)

☒ Initial Office  
☐ Boston  
☐ Amended

TYPE OF CALL (check one):

☒ Release or TOR  
☐ Complaint ☐ Inquiry

CALLER (check one):

☐ PRP  
☐ Public Safety Official  
☐ Other Government Agency  
☐ Citizen  
☐ Anonymous  
☒ LSP or PRP Agent  
☐ Other Person:

DISPOSITION OF CALL (check the one most applicable disposition below):

If selecting one of the two following options, assign a Release Tracking Number (RTN) in the space provided above:

☒ Reportable Release or Threat of Release  
☐ Release or Threat of Release Less Than Reporting Threshold

Select one of the two following options only if an RTN was previously assigned:

☐ Release Notification Retraction (with BWSC-103 only)  
☐ Not a 21E Release

If selecting any option below, do not assign an RTN:

☐ Release or Threat of Release Exempt from Reporting Requirements (not referred)

☐ Report Referred to Other Agency or Division

Referred To:

Reporting Person: Mike Robertson

Telephone (508) 756-1339

Ext.:

Organization: New England Disposal Tech.

☐ No Action Taken ☐ Site Visit ☐ Compliance Site Visit

B. RELEASE OR THREAT OF RELEASE LOCATION:

Street: 355 Main St.

Location Aid: Roadway Release

City/Town: Northbridge

Adequately Regulated Status:

Fee Status:

Type of Location (check all that apply):

☐ Commercial ☐ Industrial ☐ Residential ☐ School ☐ Municipal ☐ State  
☐ Federal ☐ Right of Way ☒ Roadway ☐ Water Body ☐ Open Space Other:

Release Tracking Number of Associated Transition or Tier Classified Site, if any:

C. RELEASE OR THREAT OF RELEASE (TOR) INFORMATION:

Notification Date, if different from log date:

"One Year" Status Date, if not one year after notification date:

Date and time reporting person obtained knowledge of the Release or TOR. 4/26/04 Time 12:50 ☐ AM ☒ PM

IF KNOWN, record date and time Release or TOR occurred. Date: Time: ☐ AM ☐ PM

Check all conditions that apply to the Release or Threat of Release:

2 HOUR REPORTING CONDITIONS

☒ Sudden Release  
☐ Threat of Sudden Release  
☐ Oil Sheen on Surface Water  
☐ Poses Imminent Hazard  
☐ Could Pose Imminent Hazard  
☐ Release Detected in Private Well  
☐ Release to Storm Drain  
☐ Sanitary Sewer Release (Imminent Hazard Only)

72 HOUR REPORTING CONDITIONS

☐ Subsurface NAPL = or > 1/2 Inch  
☐ UST Release  
☐ Threat of UST Release  
☐ Release to Groundwater near Water Supply  
☐ Release to Groundwater near School or Residence

120 DAY REPORTING CONDITIONS

☐ Release of HM(s) to Soil or Groundwater > RC(s)  
☐ Release of Oil to Soil > RC(s) and Affecting > 2 Cubic Yards  
☐ Release of Oil to Groundwater > RC(s)  
☐ Subsurface NAPL = or > 1/8 Inch and < 1/2 Inch  
☐ Check here if Substantial Release Migration exists in connection with 120 Day Reporting Conditions

Source of Release or TOR (check all that apply):

☐ UST ☒ Pipe/Hose/Line ☐ AST ☐ Drums ☐ Transformer ☐ Boat  
☐ Tanker Truck ☒ Vehicle ☐ Unknown ☐ Other Specify:

Federal LUST Eligible? ☐ Yes ☒ No ☐ Unknown

DFS UST/AST Facility ID#

DFS UST/AST Tank ID#

SECTION C IS CONTINUED ON THE NEXT PAGE.



Massachusetts Department of Environmental Protection  
Bureau of Waste Site Cleanup

BWSC-101

RELEASE LOG FORM

Release Tracking Number

2 - 15225

C. RELEASE OR THREAT OF RELEASE (TOR) INFORMATION: (continued)

Type of Release or TOR (check all that apply): ☒ Leak ☐ Spill ☐ Rupture ☐ Dumping ☐ Tank Removal ☐ Overfill  
☐ Vehicle Accident ☐ Test Failure ☐ Fire ☐ Threat Only ☐ Unknown ☐ Other Specify:

Identify Media and Receptors Affected: (check all that apply) ☐ Air ☐ Groundwater ☐ Surface Water ☐ Sediments ☐ Soil  
☐ Wetlands ☐ Storm Drain ☒ Paved Surface ☐ Private Well ☐ Public Water Supply ☐ Zone 2 ☐ Residence  
☐ School ☐ Unknown ☐ Other Specify:

O or HM Released

Hydraulic oil

(check one)

CAS # (if known)

Amount or Conc.

Units

RCs Exceeded?

☒ O ☐ HM  
☐ O ☐ HM

20

gal

yes

Description of Release or Threat of Release:

Hydraulic line on a trash truck ruptured, releasing about 20 gallons of hydraulic fluid to pavement only. Driver used a spill kit to contain the release. IRA: Remove and properly dispose of speedi dri and inspect any storm drains for impacts.

D. PRP INFORMATION:

☐ PRP Unknown ☒ PRP Performing Response Actions ☐ Check here if additional involved parties are listed on an RLFA.  
☐ PRP Unwilling or Unable to Perform Response Actions. Who is? ☐ DEP ☐ Other Person Who:

Name of PRP Organization: Browning Ferris Industries, Inc.

Name of PRP Contact: Chris Macera

Title: General Manager

Street: 1 Hardscrabble Rd.

☐ Check here if this PRP received a field NOR.

City/Town: Auburn

State: MA ZIP Code: 01501

Telephone: (508) 832-9001

Ext.:

FAX:

E. CONTRACTOR:

Contractor Name: New England Disposal Technologies

Telephone (508) 756-1339

Ext.:

Name of Contact: Mike Robertson

☐ Check here if this is a State Contractor.

F. LSP:

LSP Name: Kenneth Snow

LSP Number: 3266

Telephone (781) 273-1119

Ext.:

FAX:

G. MCP RESPONSE ACTIONS: (check any that apply)

☐ IRA Assessment Only ☒ IRA Oral Plan Approved\* ☐ IRA Oral Plan Denied ☐ IRA Pre-notification  
☐ Oral RAM Plan Approved\* ☐ Oral RAM Plan Denied ☐ Notice of Intent to Conduct a URAM

Date of Action, if different from Log Date: \* Provide details of approved plans on an RLFA.

☐ Check here if soil was removed from the site prior to notification. ☐ Check here if the soil was removed as part of an UST closure.

Quantity of soil previously removed and destination:

H. DEP ASSIGNMENT:

RNF Submittal Requested: ☒ Yes ☐ No From Who: BFI

Provisions of 21E Explained: ☐ Yes ☒ No Why Not: Already knew

Prepared By: ☒ Kevin W. Daoust

Regional Use:

Number of RLFA Pages Attached:

Staff Lead Assigned

(if different from Preparer):

☐ Check here if Release or TOR is unassigned.



Massachusetts Department of Environmental Protection  
Bureau of Waste Site Cleanup

BWSC-102B

RELEASE LOG FORM ATTACHMENT

Release Tracking Number

2 - 15225

E. LOG/RELEASE LOCATION INFORMATION: (complete if using BWSC-102B only)

City/Town: Northbridge Date: 04/28/2004 Time: 3:11 ☐ AM ☒ PM

Release Address: 355 Main St.

Use of Attachment (check one): ☐ Amendment to Release Log Form ☐ Attachment Page(s): of:

F. INSPECTIONS OR SITE VISITS (also Follow-up Office Response): (check one)

- ☐ Initial Compliance Field Response - Announced ☐ Initial Compliance Field Response - Unannounced  
☐ Compliance Field Response - Announced ☐ Compliance Field Response - Unannounced ☐ Field Audit Inspection  
☐ Field Response - Direct Oversight ☐ Follow-up or Other Field Response ☒ Follow-up Office Response

G. ADDITIONAL DESCRIPTION:

Mike Robertson of NEDT called back to update that they had inspected the storm drains, and found they were impacted. The first storm drain had free product, the second had a sheen.

They are getting a vac truck to remove the free product, and will install boom at the discharge of the storm drain - a retention pond. They believe the water level in the storm drain is high enough such that removal of sediments in the storm drains will not be necessary, but they will assess the need to.

H. DEP ASSIGNMENT: (complete if using BWSC-102A and 102B or BWSC-102B only)

Preparer of RLFA (please print): ☒ Kevin W. Daoust

Staff Lead Assigned (if different from preparer):

- ☐ Check here if the Release or Threat of Release is unassigned.  
☐ Check here if this RLFA records a change in staff lead.